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ABSTRACT

In the 1800s there were few opportunities for blacks who wanted to become physicians. Harvard and Bowdoin began accepting black students in the 1840s, but "whites only" policies existed at most schools until the 1960s. The majority of black doctors were trained in Europe or at one of the black medical colleges established after the Civil War. A number of these existed by the time of the Flexner Report of 1910, but all except Howard and Meharry were criticized by that report for being ineffective and money-wasting. Many were closed. Black doctors continued to graduate from segregated schools, but after the Flexner Report they faced even greater discrimination. Montague Cobb and the National Association for the Advancement of Colored People began to protest this segregation in the 1940s. By 1966, every school approved by the Association of American Medical Colleges had begun to admit blacks. Moreover, in 1964, the American Medical Association had declared its opposition to the exclusive policies of many of its local chapters (which ultimately had restricted membership at the national level). By then, major support programs and foundations had been established to aid black medical education. Despite these advances, the proportion of blacks who are practicing physicians has declined constantly since 1930. Only one black out of 3,800 becomes a doctor, as compared to one of 560 whites. Formidable barriers--such as the reverse discrimination concept--continue to obstruct equal medical education and opportunities. (KH)

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Introduction to the Experience: The 1840's

During the 1840's, many Black students struggled to gain admissions to the predominantly White medical schools. Generally, these students did not succeed and many went to study in European countries. During this period, none of the predominantly Black colleges existed, and all Black students and practicing physicians who desired additional medical training were faced with attempting to gain admissions to many institutions that had "White only" policies. Academic requirements for the medical doctor (M.D.) degree were minimal in comparison to the present requirements, and consisted mainly of attending lectures for periods ranging from six months to two years. A high school diploma was a basic prerequisite, placing many Blacks at a disadvantage because of disproportionate numbers of students without the diploma. History has illustrated the status that the country assigned to Blacks during these days of slavery, and this status meant limited or denied access to education, along with barriers such as restrictive admissions policies in medical schools. As a result of these barriers, Blacks such as Dr. James McCune Smith[1] and Dr. Alexander T. Augusta attended medical schools abroad at the University of Glasgow in Scotland and Trinity Medical College in Toronto, Canada.[2] Dr. Augusta went on to achieve recognition as the first Black person to become the head of a hospital in the United States.[3]

However, there were several exceptions as Blacks began to gain admission to predominantly White northern medical schools. In 1847, David J. Peck became the first Black to receive the M.D. from an American medical school, Rush Medical College. In Bowdoin College (which then had a medical school) M.D. degrees were conferred on John V. DeGrasse and Thomas J. White. The education of these two Black men was supposed to be for the purpose of preparing them for medical missionary services in Liberia, but both refused to carry out this expectation. In 1844, another Black, Dr. Delany, gained admissions to Harvard Medical School.[4]

The 1860's and the Black Colleges

By 1860, nine predominantly White northern medical schools were accepting Black students. These schools were: The American Medical College in Cincinnati; Berkshire Medical School in Pittsfield, Massachusetts; Bowdoin in Maine; Bush in Chicago; Caselton in Vermont; Eclectic in Philadelphia; Homeopathic College of Cleveland; Harvard Medical School; and the Medical School of the University of New York.[5] However, the training of Blacks for the medical profession was not a widespread practice and during this period many of the Blacks that received medical training had to practice in other countries such as Liberia.

In Washington, D.C., the predominantly Black college, Howard University, opened in 1866, and two years later opened a medical school.[6] The first medical class at Howard consisted of eight students, one of whom was White, and five teachers, one of whom was Black. The Howard faculty was highly regarded by the American Medical Association which was founded in 1847. Also, the Meharry Medical College was founded in 1876 in Nashville, Tennessee, and went into operation with less than a dozen students and two White faculty members. This school was founded primarily for Blacks from southern states, and was not accredited as a Grade A medical school until 1923.[7] Ultimately, Howard and Meharry would graduate significant numbers of the Black physicians in this country.

The 1880's and the Black Medical Schools

During the period from 1880 to 1910, five more predominantly Black medical schools opened and these included: Leonard Medical School in Raleigh (Shaw University) in 1882; Louisville National Medical College in 1888; Flint Medical College of New Orleans in 1889, the Medical Department of the University of West Tennessee in Memphis in 1900, and the Chattanooga Medical School existed from 1902 to 1904.[8] In 1895, only 27 out of 385 Black physicians, or 7 percent, had graduated from White medical schools.[9]

The 1900's and the Flexner Report

The Carnegie Corporation for the Advancement of Teaching commissioned Abraham Flexner to conduct an exhaustive study of medical education in the United States and Canada with the study to include personal site visitations to the targeted medical schools. In this regard, Flexner visited and compiled detailed reports on the seven Black medical schools that were operating when the study commenced in 1908. The evaluation report, Medical Education in the United States and Canada, was published in 1910, and shaped the future of the Black medical schools for the next half century.[10]

Although Flexner was critical of Black and White medical schools, his assessment of the seven Black medical schools was critical as many of the schools were struggling for survival. In fact, one school was eight years old while another was thirteen years old. With the exception of Howard and Meharry, the remaining five Black medical schools had been operating for an average period of seventeen years each. Furthermore, these five schools were attempting to raise additional operating monies, expand laboratory facilities, and attract skilled faculty members to struggling schools attempting to educate and train Black medical students. The historical context for the development of these embryonic institutions placed them within fifty years of the long shadow of slavery.

However, the Flexner report recommended that with the exception of Howard and Meharry, all Black medical schools terminate their operations because they were rated as ineffective, were seen as wasting money, and were reportedly producing undisciplined physicians who were not professionally trained. Flexner's most powerful assumption was that Blacks would only practice on their own people and the report recommended that hygiene should be emphasized rather than surgical training. This recommendation had a tremendous impact on Black medical training and future opportunities. That is, a complete medical education includes internships, residency, specialization and professional affiliations. After the release of the Flexner report, Black medical students encountered widespread de facto and de jure discrimination. In 1905, 213 of 1,465, or 14.5 percent of Black physicians were graduates from White medical schools.[11]

The 1940's and Black Medical Education

During the 1940's, it became clear to Montague Cobb and the National Association for the Advancement of Colored People (NAACP) that the system of segregated medical education had gone far enough. For example, Cobb pointed out that Howard and Meharry were forced to accept applicants whose aptitude test ratings were regularly below the national mean because they came from states with inferior primary, secondary and college school systems.[12] Therefore,

the graduates of Howard and Meharry had disproportionately high rates of failure in passing state board examinations to practice medicine. In 1947, of the 98 Black physicians who were specialists, slightly more than half were graduates from predominantly White colleges which had graduated only approximately 15 percent of all Black physicians. This same year, Howard admitted only 74 of 1,351 applicants and Meharry admitted only 55 of 800 applicants to medical school.[13]

Barriers Break and Black Access Increases: The 1960's

Discriminatory practices such as White-only clauses in admissions policies (often widely publicized) limited the enrollment of Blacks in medical schools. However, the exceptional Black students were accepted by some of the prestigious eastern medical schools such as Harvard, Yale, and Pennsylvania. In addition, newer schools in the Midwest such as Michigan, Indiana, and Northwestern also admitted some aspiring Black medical students.

However, the number of Blacks admitted was minimal as the years prior to World War II revealed that twenty-six of the seventy-eight Association of American Medical Colleges approved medical schools were closed to Black students.[14] During the post-war period, the NAACP commenced a protracted series of legal suits that resulted in a number of decisions by the Supreme Court in favor of desegregating the all-White medical schools.[15] As a direct result of the NAACP initiatives, 14 of the 26 schools closed to Blacks were desegregated by 1960.[16]

Among the fourteen major institutions reversing "Whites-only" policies by 1960 were: the University of Arkansas, St. Louis University, the University of Texas, Washington University, the University of Louisville, the Medical College of Virginia, the University of Maryland, and the University of North Carolina. Additional medical schools in southern and border states reversed their policies as Duke, Emory, Johns Hopkins, Baylor, Louisiana State, Vanderbilt, and the Medical College of Alabama increased the number of schools to 19 during the 1963-64 academic year. The policies of the remaining medical schools were reversed and the summer of 1966 brought the acceptance of Black students to all of the medical schools approved by the Association of American Medical Colleges.

In the fall of 1969, Blacks made up 2.75 percent of the medical school student body enrollment of approximately 38,000 students, and 2.2 percent of the 230,000 practicing physicians.[17] An analysis of the number of Blacks enrolled in predominantly White colleges indicates an increase in total numbers of undergraduate Black students attending predominantly White colleges rather than the weaker, segregated, Black colleges in the south, which had provided the chief source of educational opportunities for Blacks.[18]

A 1969 report prepared in behalf of the NMA-AMA Liaison Committee which was charged with directing attention toward expanding opportunities for Blacks in the medical field involved a survey of 98 medical schools in the nation. The schools were asked to provide the number of Black students enrolled in each class and to provide any special programs aimed at increasing the number of Black students in the school. The results of this survey indicated than an

increase had occurred in Black enrollment from 1.95 percent for the medical class of 1968, to 2.87 percent for the class of 1972. However, when Howard and Meharry are excluded from this group, the percent reduces to 2.39, as 61.77 percent of these 36,809 Black students were enrolled in either Howard or Meharry. Eighty-four of the 98 schools reported at least one Black student, and 54 schools had special recruitment programs for Black medical students.[19]

Although there have been some improvements in the access of Blacks to medical schools, only one Black out of every 3,800 eventually becomes a doctor as compared to one of every 560 for Whites.[20] In order to decrease this gap, additional and continued special academic programs for Black medical students would be necessary over long-range periods. Specifically, high schools need to be reached with special programs as the majority of Black students are decidedly disadvantaged in school and family life. Many of these students are deprived of equal educational opportunities at early grade levels, with the long-term effect of depressed scores on the Medical College Admissions Test and other conventional aptitude measures.

The Role of the American Medical Association

The American Medical Association (AMA) was founded in 1847 as the principal professional medical organization. For decades, the AMA excluded Blacks from membership and held the same "Whites-only" policies that many medical schools practiced. In 1869, three Black faculty members of the Harvard Medical College made application for membership in the local AMA branch in Washington, D.C., and were turned down. Subsequently, with their White supporters, they brought their application for membership to the AMA Annual Convention in 1870, but the convention upheld the ruling denying membership.

As a direct result of the racially-exclusive policies of the AMA and affiliated bodies, a great number of local all-Black medical societies were formed, and in the District of Columbia, Black and White doctors formed the National Medical Society in 1870[21] and the all-Black National Medical Association was formed in 1880.[22] For many decades, the AMA excluded Blacks from joining the national organization because one could not be a member of the national body without holding membership in the local and state AMA chapters.

In 1884, a group of White doctors organized the Medico-Chisurgical Society of the District of Columbia, a biracial organization.[23] Other developments included the establishment in 1886 and 1887 of the all-Black Lone Star Medical Association of Texas and the Old Northern State Medical Society of North Carolina in 1886 and 1887.[24]

When the Second World War ended in 1945, the American Medical Association was almost one hundred years old and was a federation of county and state medical societies. For almost seventy-five years petitions had been made to the national organization concerning the exclusion of Black physicians from county and state societies in the country, and from the AMA itself. However, all motions to this effect had been brushed aside by the parent organization on the grounds that its constitution and organization structure prohibited it from intervening. Finally, in 1964, under repeated pressures from the NAACP and other

advocacy groups, the AMA voted itself as being unalterably opposed to such exclusive policies, and called upon component societies to exert every effort to end racial exclusion.[25]

Support Programs and Foundations

In 1948, the National Scholarship Service and Fund for Negro Students (NSSFNS) was established for the purpose of increasing the enrollment of Blacks in interracial colleges. NSSFNS has worked with over 450 colleges and has placed over 12,000 students during a seventeen-year period. These colleges accepted Black students whose high school credentials were not up to the standards of the average applicant, but recognized that this was a result of educational deprivation reflected in segregated schools in economically depressed areas. NSSFNS attempts to place only those students whose high school credentials are close to college requirements, and reports a dropout rate of only nine percent as compared to the national average for Black students of over 40 percent.[26] These efforts are designed to increase the numbers of Black undergraduates who complete degree programs and ultimately provide a greater pool of potential Black medical school students.

Dr. Franklin C. McClean founded the National Medical Fellowships (NMF) program in th 1950's, and this program was designed to provide financial assistance to Black medical school students, and develop new support programs for these students.[27] By 1959, NGM had awarded a total of $745,230 in grants to two hundred and forty-six students.[28] In the 1960's, this organization was awarded a Sloan Foundation grant to provide financial support to the top ten Black medical school applicants in the country. These Sloan Fellows had to achieve scores in the 500 range or better (500 is the standardized mean score or the "average" score expected from students) on the Medical College Admissions Test, and were expected to remain in good academic standing in their respective medical school programs.[29] Other foundations such as Macy, Ford, and Rockefeller have taken interest in providing support for Black medical school aspirants by providing financial scholarships and programs designed to prepare Black students for medical school.

In 1956, W. Montague Cobb, the head of the Department of Anatomy at Howard University Medical College, formed an organization called the Imohstep (He who cometh in peace) National Conference on Hospital Integration. This conference had the purpose of advocating for laws eliminating segregated hospital service; promoting lawsuits designed to bar public monies from construction on operation of segregated services; and to advise governmental bureaus and administrations regarding the removal of racially discriminatory practices. The conference was sponsored by the National Medical Association, the Medico-Chisurgical Society of the District of Columbia, and the National Association for the Advancement of Colored People. Invitations were extended to the American Medical Association, the American Hospital Association, the American Nurses Association, the National Health Council, the United States Health Service, the American Protestant Hospital Association, and the Catholic Hospital Association. None of these invited organizations sent representatives.[30]

This conference was held for the next seven years, and support gradually developed. Finally, in 1964, the American Hospital Association issued a statement to the effect that medical and hospital care should be made available to all races without restrictions. Also in 1964, Title VI of the Civil Rights Act was passed specifying that federal funds could not be awarded to any program that excluded people for reasons of race, color, or national origin.[31]

Projections for the 1980's

Between 1930 and 1970 the Black population in the United States increased from approximately twelve million people to about twenty-three million, or an increase greater than 89 percent. However, the number of Black physicians and surgeons increased by only 24 percent during this same period.[32] Indeed, the proportion of Blacks who are practicing physicians has constantly declined since 1930, while the proportion of White practicing physicians remained fairly constant from 1930 to 1960, but increased significantly between 1960 and 1967.[33]

Table 1

Percentages of Black and White Practicing Physicians

	1930	1940	1950	1960	1967
Blacks	3.1	2.7	2.4	2.1	2.1
Whites	13.6	13.6	13.9	13.8	16.5

In addition, according to the National Center for Education Statistics, there were only 14 Blacks who were conferred the doctor's degree in the health professions, while there were 431 Whites conferred the same degree in the academic year 1976-1977.[34] These proportions, along with the higher dropout rate for Blacks in medical school which is three times higher than the dropout rate for Whites (4.5 percent for Blacks, 1.5 percent for Whites),[35] indicate that the decline of the Black medical school student population and the number of practicing Black physicians will continue in the 1980's.

Summary

One hundred years after the opening of Howard University, Black students were deemed acceptable by the approved medical schools. Therefore, the Black experience in medical school programs has not been a glorious chapter in the history of this nation. This was realized when the early efforts of qualified Blacks to gain acceptance to all-White institutions were rebuffed. The predominantly Black institutions that survived such as Howard and Meharry accepted some of the aspiring Black medical school students into their programs, but these schools could only accept a limited number due to limited budgets and resources. Thus, many Black medical students went without medical school opportunity during the latter half of the nineteenth century and throughout the first half of the twentieth century.

Enrollment gains have occurred during the last several decades for Black medical students but formidable barriers exist such as overt and covert discriminatory practices and the concept of "reverse discrimination." All of these barriers pose problems for the future enrollment of Black medical students in an era of increased attitudinal conservatism and monetary inflation. However, institutions need to continue to address the issue of access for Black students interested in medical education by continuing and strengthening existing programs and taking new initiatives.

Notes

1. "James McCune Smith, 1811-1865." Journal of the National Medical Association. XLIV (March, 1952), p. 160; and also, Paper by Dr. P.A. Johnson, minutes of the National Medical Association, 1905.

2. See John A. Kenny, The Negro in Medicine (Ann Arbor, Michigan: University Microfilms, 1912), p. 7.

3. William Montague Cobb, "Alexander Thomas Augusta", Journal of the National Medical Association, XLIV (March, 1957), p. 129.

4. See H. M. Morais, The History of the Negro in Medicine (New York: Publishers Co., 1968), p. 28; and William Montague Cobb, "Martin Robison Delany, 1812-1885", Journal of the National Medical Association, XLIV (May, 1952), pp 232-238.

5. J. L. Curtis, Blacks, Medical School, and Society. (Ann Arbor: University of Michigan Press, 1971).

6. W. Dyson, Founding of the School of Medicine of Howard University, 1868-1873 ("Howard University Studies in History", No. 10, Washington, 1929); and Alain Locke, ed., "Howard the National Negro University", The New Negro. An Interpretation. (New York: Arno Press, 1968), pp. 312-322.

7. See C.V. Roman, Meharry Medical College: A History. (Nashville, Tennessee, 1934).

8. Morais, The History of the Negro in Medicine, p. 66.

9. Ibid., p. 60.

10. See Abraham Flexner, "Medical Education in the United States and Canada, A Report to the Carnegie Foundation for the Advancement of Teaching." (New York, 1910); for a discussion of this report see John E. Deitrick and Robert Berson, Medical Schools in the United States at Mid-Century (New York: McGraw-Hill, 1953), p. 13.

11. Morais, The History of the Negro in Medicine, p. 60.

12. Curtis, Blacks, Medical School, and Society, p. 18.

13. Ibid.

14. See Charles S. Johnson, The Negro in American Civilization. (New York: Holt and Company, 1930), pp. 288-289; and Morais, The History of the Negro in Medicine, p. 137.

15. "N.A.A.C.P. Legal Defense and Educational Fund, Inc. Cases", Journal of the National Medical Association, LVII (November, 1965), pp. 513-514.

16. See Dietrich Reitzes, Negroes and Medicine (Massachusetts: Harvard University Press, 1958), pp. 3-12 for number and proportion of Negroes in medical schools from 1938-1956.

17. See Curtis, Blacks, Medical School, and Society, Table I, p. 30.

18. Ibid., Table II, "Trends in Black College Freshmen Enrollment 1966-1969, p. 31.

19. Crowley, A.E. and Nicholson, H.C., "Negro Enrollment in Medical Schools", Journal of the American Medical Association 210: 96-100, October 6, 1969.

20. Ibid.

21. Morais, The History of the Negro in Medicine, p. 54.

22. Curtis, Blacks, Medical School, and Society, p. 23.

23. Morais, The History of the Negro in Medicine, p. 57.

24. Ibid., p. 58.

25. Morais, The History of the Negro in Medicine, p. 175.

26. Curtis, Blacks, Medical School, and Society, pp. 62-63.

27. Ibid., p. xiv.

28. Morais, The History of the Negro in Medicine, p. 139.

29. Curtis, Blacks, Medical School, and Society, p. 47.

30. Ibid., p. 20.

31. Ibid., p. 22.

32. Andrew A. Sorenson, "Black Americans and the Medical Profession, 1930-1970." The Journal of Negro Education, XLI, Fall, 1972, p. 338.

33. Ibid.

34. See Table III, "Bachelor's Master's, and Doctor's Degrees Conferred by Institutions of Higher Education, by Racial/Ethnic Group and by Major Field of Study: United States, 1976-1977." Digest of Education Statistics, 1980, p. 125.

35. Sorenson, "Black Americans and the Medical Profession, 1930-1970", p. 340.

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